## CALIFORNIA LIQUID WASTE HAULER RECORD STATE WATER RESOURCES CONTROL BOARD

015- g

STATE DEPARTMENT OF HEALTH			
PRODUCER OF WASTE (Must be filled by producer)			HAULER OF WASTE (Must be filled by hauler) SFUND RECORDS CTR
Name ALUMINUM CO OF AMERICA			ASBURY OIL CO.  13419 Halldale Ave., Gardena, California 90249 Phone: (213) 321-1392
Pick up Address: 575 ALCOA AVE. VERVON CALIE  [NUMBER] (STREET)  P.O. or Contract No.			Pick Up: 10 7 Time: Comm
Order Placed By: Date:			State Liquid Waste Hauler's Registration No. (if applicable):
Type of Process which Produced Wastes:  (Examples: metal plating, equipment cleaning, oil drilling wastewater treatment, pickling bath, petroleum refining)			(SPECIFY)
DESCRIPTION OF WASTE (Must be filled by producer)			The described waste was hauled by me to the disposal facility named below and was accepted.
Check type of wastes:  1. [] Acid solution			I certify (or declare) under penalty of perjury that the foregoing is true and correct.  **GNATURE OF AUTHORIZED AGENT AND TITLE*
	7. [_] Chemical toilet wastes	12. [] Cannery waste	DISPOSER OF WASTE (Must be filled by disposer)
	8. [] Tank bottom sediment 9. [] Oil	13. D Latex waste	Name (print or type): Deputing a land
	10. Drilling mud	15. D Brine	Site Address: Code No.
	1		The hauler above delivered the described waste to this disposal facility and it was an acceptable
Other (Specify) ALUMIUM OXIDE & WATER			material under the terms of RWQCB requirements, State Department of Health regulations, and
Components: (Examples: Hydrochloric acid, lime, caustic soda, phenolics, solvents (list), metals (list), Upper Lower % ppm organics (list), cyanide)			Ouantity measured at site (if applicable):State fee (if any):
			Handling Method(s):
			recovery
2.			treatment (specify):
<u>3</u>			treatment (specify):  (EXAMPLES: INCINERATION, NEUTHALIZATION, PRECIPITATION)  CODE NO.  disposal (specify): pond spreading tandfill injection well
4.			Other (specify):
5.			CODE NO.
Hazardous Properties of Waste:			Disposal Date:
pH 1 none [] toxic [] flammable [] corrosive [] explosive			i certify (or declare) under penalty of perjury that the foregoing is true and correct.
Bulk Volumer [] gal [] tons   0   Darrels   Other   The s			WHATURE OF AUTHORIZED AGENT AND TITLE
Bulk Volumer	gal () tons	42 gal.) Other (SPECIFY)	The site operator shall submit a legible copy of each completed Record to the State Department of Health with monthly fee reports.
Containers:	Cartons Cartons Cartons	pags Q other / A A (specify)	1/1/
Physical State: Solid Stiquid Studge Other (SPECIFY)			$\mathbb{I}_{\mathbb{A}}$
Special Handling Instructions (if any):			-
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The waste is described to the best of my ability and it was delivered to a licensed liquid waste hauler (if applicable).			i e
I certify (or declare) under penalty of perjury that the foregoing is true and correct.			FOR INFORMATION RELATED TO SPILLS OR OTHER EMERGENCIES INVOLVING HAZARDOUS WASTE OR OTHER MATERIALS CALL (800) 424-9300.
	SIGNATURE	OF AUTHORIZED AGENT AND TITLE	D.O.T. Proper Shipping Name